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(Requestor's Name)			
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JAN 21 2009

EXAMINER



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DIVISION OF COMPARATIONS

COVER LETTER

10:	Division of Corporations	
SUBJ		INVESTMENTS, LLC
	((Name of Limited Liability Company)
Dear :	Sir or Madam:	
The sec	uning distance di Anno de (non estimate)	etand Office Change and fee(s) are submitted for filter
i ne e	nciosea Registerea Agent/Regis	stered Office Change and fee(s) are submitted for filing.
Please	e return all correspondence conc	cerning this matter to the following:
т	effrev Flanagan	
	(Name of Person)	<u> </u>
	,	
F	lanagan & Williard, (Firm/Company)	P.A.
	(Firm/Company)	
1	450 Madruga Avenue,	#407
	(Address)	<u>π+07</u>
C	oral Gables, FL 3314	
	(City/State and Zip Cod	le)
Ean fo	orther information concerning th	sia mattan plaasa aalli
ror iu	ittler illiorniation concerning ti	ns matter, prease can.
J.	effrey Flanagan	at (305) 444-1500
	(Name of Person)	(Area Code & Daytime Telephone Number)
	STREET/COURIER ADDRES	
	Registration Section Division of Corporations	Registration Section Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	
	Enclosed is a check for the f	ollowing amount:
	\$25 Filing Fee ■	□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:TANGER	INVESTMENTS, LLC			
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	v: 2999 Brickell Avenue Miami, FL 33129			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2999 Brickell Avenue Miami, FL 33129			
05/08/2001 3. Date of filing/registration in Florida	L0100007241 4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Jeffrey M. Flanagan, Esq.			
Registered Office Address:	999 Ponce de Leon Blvd, #1000 Coral Gables, FL 33134			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent:</u>				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1450 Madruga Avenue, #407 Coral Gables, FL 33146 ,FL			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member o) authorized representative of a member)				
Jettrey M. Flanagan	7			
(Printed or typed name of signee) I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the promotion of amiliar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	gree to act in this capacity. I further agree to some of the solution of this change.			
Oivision of Corporations, P.O. Box FILING FEE	· · · · · · · · · · · · · · · · · · ·			